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Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

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## UTILITY PATENT APPLICATION TRANSMITTAL

Please type a plus sign (+) inside this box → +

Attorney Docket No. TI-32075

First Named Inventor or Application Identifier Aris Papasakellariou, et al.

Method and Apparatus for Spread Spectrum Interference Cancellation

(Only for new nonprovisional applications under 37 CFR 1.53(b))

Express Mail Label No.

	ON ELEMENTS ing utility patent application contents	ADD	ADDRESS TO:  Assistant Commissioner for Patents Box Patent Application Washington, DC 20231  Assistant Commissioner for Patents DC 20231					
1. X Fee Transmittal Form ( (Submit an original, and a continuous)	(e.g., PTO/SB/17) fuplicate for fee processing)	6.		Microfiche Computer Program (Appendia	s. 4576			
2. X Specification (preferred arrangement		] 7.		eotide and/or Amino Acid Sequence Submi plicable, all necessary)	^ <u>~ ~ ~ ]</u>			
<ul> <li>Descriptive title of the</li> <li>Cross References to F</li> </ul>			a.	Computer Readable Copy				
<ul> <li>Statement Regarding</li> <li>Reference to Microfich</li> </ul>			b.	Paper Copy (identical to com	nputer copy)			
- Background of the Inv - Brief Summary of the	ention		<b>C</b> . ,	Statement verifying identical	of above copies			
- Brief Description of the - Detailed Description			ACCOMPANYING APPLICATION PARTS					
- Claim(s)		8.	X	Assignment Papers (cover sheet & Docu	uments(s))			
- Abstract of the Disclos  3.		] ] 9.		37 CFR 3.73(b) Statement (when there is an assignee)	Power of Attorney			
4. Oath or Declaration	[Total Pages 1	<i>]</i> 10.		English Translation Document (if applica	able)			
a. X Newly Executed	(original or copy)	11.	X	Information Disclosure Statement (IDS)/PTO-1449	Copies of IDS Citations			
h	or application (37 CFR 1.63(d)) /divisional with Box 17 completed)	12.		Preliminary Amendment				
[Note	Box 5 below]	13.	Return Receipt Postcard (MPEP 503) (Should be specifically itemized)					
I. Signe name	TION OF INVENTOR(S) d statement attached deleting inventor(s) d in the prior application, 7 CFR 1.63(d)(2) and 1.33(b).	14.	(PTO/SB/09-12) Certified Copy of Priority Document(s)					
5. Incorporation By Refere The entire disclosure of	nce (useable if Box 4b is checked) the prior application, from which a copy of a supplied under Box 4b, is considered as	15. 16.		if foreign priority is claimed) Other:				
	ure of the accompanying application and is		A new statement is required to be entitled to pay small entity fees, except where one has been filed in a prior application and is being relied upon.					
	TION, check appropriate box and sup				ry amendment:			
Continuation  Prior application informa	Divisional ☐Continuatio  tion: Examiner	n-in-pai	t (CIP) 	of prior application No:  Group / Art Unit:	<i>/</i> .			
	18. CORRESPOND	ENCE	ADDRI	ESS				
Customer Number or Bar Coo	de Label	94		or Correspondence addre	ess below			
NAME								
ADDRESS								
CITY COUNTRY	STATE   TELEPHONE   972/917	7-5455		ZIP CODE FAX 972/9	917-4418			
Name (Print/Type)	Pedro P. Hernandez	. 1	Reg	sistration No. (Attorney/Agent) 35,				
Signature	AP.G	1		Date/ 19/8/01				

Burden Hoer Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office. Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Assistant Commissioner for Patents, Box Patent Application, Washington, DC 20231.

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## **FEE TRANSMITTAL**

Patent fees are subject to annual revision on October 1. These are the fees effective October 1, 1997 Small Entity payments must be supported by a small entity statement, otherwise large entity fees must be paid. See Forms PTO/SB/09-12.

Complete If Known							
Application Number							
Filing Date	10/09/2001						
First Named Inventor	Aris Papasakellariou, et al.						
Examiner Name							
Group / Art Unit							
Attorney Docket No.	TI-32075						

TOTAL A	MOUNT O	F PAY	PAYMENT (\$) 740.00					Attorney Docket No. TI-32075						
METHOD OF PAYMENT								FEE (	CALCULAT	ON (continued)				
The Commissioner is hereby authorized to charge to the following Deposit Account,					3.	ADDIT	IONAL	. FEES						
Deposit Account Number 20-0668			Large Fee	Entity Fee	Small Fee	Entity Fee	F	December 100						
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Charge any additional fee required or credit any overpayment Charge all indicated fees and any additional fee required or credit any overpayment					139	130	139	130	Non-English s	pecification				
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or number previously paid, if greater; For Reissue, see below						149	790	249	395	For each addit examined (37	ional invention to be CFR 1.129(b))			
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Fee Code		Fee Code	Fee (\$)		Fee De	scripti	on							
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SUBMITTED BY  Typed or British Name  Pedro P. Hernandez						<del>-</del>				Reg. Number	35,190			
Typed or Printed Name Peuro P. Herriandez						<del>/</del> -	Date	T		Deposit Account User ID				
Signature				K 7	al 7	1-	Xkan	/		0/8/	/			